PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

1980 9609

_		·										
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	NTITY	OR		R THAN ENTITY
TOTAL CLAIMS			57		· .			RATE	FEE	٦ ``	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	-	†
TOTAL CHARGEABLE CLAIMS			57 1	57 minus 20=		·37		XS 9=		OR	XS18=	666
INDEPENDENT CLAIMS			7 minus 3 = "		•			X43=	 	1	X86=	1
М	ULTIPLE DEPE	PRESENT						-	-OR		 	
• If the difference in column 1 is less than zero, enter "0" in column 2								+145=	ļ	OR	+290=	11/2/
CLAIMS AS AMENDED - PART II								TOTAL		OR	TOTAL	14 96
2	760/07	(Column 1)		(Column 2) (Column 3)				SMAĻL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER '	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	1.57	Minus	- 3	2	<u> </u>		X\$ 9=		OR	X\$18=	/
AME	Independent	1. 2	Minus	<u> </u>		= 0		X43=		OR	X86=	
<u> </u>	FIRST PRESI	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM			+145=		OR	+290=	
							L	TOTAL		┨ _╱ ╻╏	/OTAL	
		(Column 1)		(Colum	ın 2)	(Column 3)	A	DDIT. FEE	· ·	1011	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE] 	RATE	ADDI- TIONAL FEE
	Total	*	Minus	••		=		X\$ 9=		OR	X\$18=	: -
AME	Independent		Minus	***		=		X43= ·		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=	
-			÷				L AC	TOTAL ODIT. FEE		OR A	TOTAL DDIT. FEE	
_	<u> </u>	(Column 1) CLAIMS	1	(Columi		(Column 3)				_	<u>.</u>	
MEN		REMAINING AFTER AMENDMENT		PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		2	十	X43=			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
• 11	the entry in colum	nn 1 is less than th	e entre in note	uma Oin es	3° in		Ŀ	+145≃		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **OPA ADDIT. FEE **OPA ADDIT. FE											TOTAL DDIT. FEE	
T	he *Highest Num	ber Previously Paid	For (Total or	Independent	l) is the I	highest number	found	in'the appr	opriate box	in colur	mn 1.	